(b) if so, the details thereof;

(c) whether Government are planning to increase the rates for different tests; and

(d) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (d) Rates for CGHS, Delhi were revised *w.e.f.* 1.11.2006 and in respect of other cities in June, 2007. Rates for various procedures were arrived at on the basis of rates quoted by private hospitals/diagnostic centres in response to tender notice issued in March-April, 2004. Fresh empanelment of private hospitals and diagnostic Centres under CGHS was taken up to have competitive rates for various procedures and services, as also directed by the High Court of Delhi in CWP No. 4754 of 1996 in Shri T.S. Oberoi *Versus* Union of India.

Requirement of syringes

2711. SHRI TARIQ ANWAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the total number of syringes required in the country every year;

(b) whether it is a fact that the syringes used in the country are unsafe according to the report of World Bank;

(c) if so, the details thereof; and

(d) that steps Government are taking in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) The Ministry does not maintain data on total no. of syringes required in the country. However, there are more than 30 manufacturing units of disposable/single use syringes and needles in the country and 10 registered, overseas manufacturing sites of disposable/single use syringes and needles for import into the country. Report of shortage of disposable/single use syringes and needle in the country has not come to the notice of this Ministry.

(b) to (d) No, Sir. No study was Conducted by the World Bank to access the safety of syringes. However, a study was conducted to assess injection practices in India by 'International Clinical Epidemiology Network' (INCLEN), in-coordination with Clinical Epidemiology Unit, All India Institute of Medical Sciences, New Delhi and supported by Ministry of Health and Family Welfare, Government of India and World Bank. In this study of syringing practices, 67% cases were found to be unsafe practices.

PMSSY in Rajasthan

2712. DR. GYAN PRAKASH PILANIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the present status of the Pradhan Mantri Swasthya Suraksha Yojana and the achievements thereof in the country, particularly in Rajasthan;

(b) whether in Rajasthan, implementation of the scheme has been delayed due to lack of funds; and

(c) if so, the steps being taken to provide sufficient funds for the scheme?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) The Cabinet Committee on Economic Affairs (CCEA), in its meeting on 16,.3.2006, has approved the setting up of six AHMS-like institutions. In so far as AIIMS, Jodhpur in Rajasthan, the State Government has provided 100 acres land. The boundary wall around the site has already been completed. WAPCOS, a Government of India organization has completed Environmental Impact (EIA) Study and pre-construction survey. The State Government has been requested to provide facilities for water, power and sewage connectivity.

The bid process for selection of Project Consultant in 2006 was unresponsive. Likewise, the offer to short listed Architectural Design Consultant for preparing enlarged concept design was rejected due to the exorbitantly high price quoted by them. The whole process has been initiated de novo.

The construction of housing complex (houses and hostels) is proposed through a turnkey developer for EPC (Engineering, Procurement and Construction). The Request for proposal has been issued in May, 2007 to shortlisted bidders. The bids for the selection of EPC Developer were opened on 16.8.2007. Bids are being evaluated. Likewise, the process of selection of Design-DPR Consultant for preparing the detailed project report of medical college and hospital complex has been initiated. The Request for Proposals has been issued to shortlisted bidders in May, 2007 and last date for receipt of bids is 24.9.2007.

It is expected that the civil construction work would start by early 2008 and be completed in 2009 (for housing/hostel) and in 2010-11 (for hospital/medical college complex).

(b) and (c) No, Sir.

IMR reduction meassures

2713. DR. GYAN PRAKASH PILANIA:
SHRIMATI MAYA SINGH:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the National Rural Health Mission (NRHM) seek to reduce the Infant Mortality Rate (IMR) to under 300 per 1000 live births, Maternal Mortality Rate (MMR) to 100 per 100,000 live births and Total Fertility Rate (TFR) to under 2.1;

(b) if so, what is the road-map and time frame for achieving the said laudable objectives;

(c) what is the present status of IMR, MMR and TFR in India and various States; and

(d) how the above statistics compare with neighboring countries and other advance countries?